

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(A)
FY 2005**

Docket Number:

IDT-1616

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number: 09/807,913

Filed: 6/20/2001

TEST BUS ARCHITECTURE FOR EMBEDDED RAM AND METHOD OF..."

Art Unit: 2133

Examiner: Guy J. Lamarre

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$1,020.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☐ Applicant claims small entity status. See 37 CFR 1.27.

03/17/2006 CNEGA1 00000007 500574 09607913

☐ A check in the amount of the fee is enclosed.

01 FC:2253 1020.00 DA

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number: 50-0574 (Atty. Docket No: IDT-1616). I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 38,186

☐ attorney or agent under 37 CFR 1.34(a)

Registration number if action under 37 CFR 1.349a) _____

Signature:



Date: March 13, 2006

E. Eric Hoffman, Esq.

Telephone: (925) 895-3545

Customer No.: 027158

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

I hereby certify that this correspondence is being deposited with the United States Postal Service as FIRST CLASS MAIL in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

3/13/06

Date



Signature: Carrie Reddick